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(Requestor's Name)		
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M. HODGE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MSJ BUSINESS ENTERPRI	SES, LLC Liability Company)
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing M	ember or Manager and fee(s) are submitted for filing
Please return all correspondence concerning this ma	tter to the following:
ALEJANDRO R. QUINTA (Name of Person)	
(Firm/Company)	
3199 SW 109 COURT (Address)	
MIAMI, FLORIDA 33165	
(City/State and Zip Code) For further information concerning this matter, please	se call:
	305 436-6016
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee CR2E079 (8/05)	□\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, SARAY LEAL	, hereby resign as MANAGER	
	(Title)	
of MSJ BUSINESS ENTERPRISES		
(Limited Liability Company)		
a limited liability company organized under the lav	vs of the State of FLORIDA	
and affirm that the limited liability company has be	een notified in writing of the resignation.	
Sarait	Kanli	
(Signature of resigning manager, 1	managing member or member)	

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314